

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
Bureau of Elections

10 PB

### POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF

Name: Alvarez, Sophia, \_\_\_\_\_, \_\_\_\_\_  
Last Name First Name Middle Name or Initial Suffix

Residential Address: 360 Arch St

City: Sunbury State: PA Zip Code: 17801

Municipality (City, Boro, or Township): Sunbury Gender: F ☒ M ☐ NB ☐

**Mailing Address (if different from residential):** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): Northumberland

Office for which you are seeking nomination: **Presidential Elector**

Email address: Sweetsun 79@gmail.com

Name as it is to appear on the Ballot: Sophia Alvarez

CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

27 day of July 20 24

Carolyn L. Marles  
Signature of Officer Administering Affirmation

Notary Public

Official Title

My commission expires 5-30-2028

**I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.**

\_\_\_\_\_

Signature of Candidate

570 326 · 4510

Telephone Number \_\_\_\_\_

Northumberland

County of Residence

## OFFICE USE ONLY

COUNTY CODE		\$		AMOUNT RECEIVED		F		M	
OFFICE		DISTRICT		POLITICAL PARTY		NUMBER OF PAPERS			
COMMENTS									
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**COMMONWEALTH OF PENNSYLVANIA**  
**DEPARTMENT OF STATE**  
**Bureau of Elections**

**PB**

**POLITICAL BODY CANDIDATE'S AFFIDAVIT**

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Berks

Name: Stephens Jacob Charles  
Last Name First Name Middle Name or Initial Suffix

Residential Address: 2490 Hopewell Rd

City: Elverson State: PA Zip Code: 19520

Municipality (City, Boro, or Township): Caernarvon Township Gender: F ☐ M ☒ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): Caernarvon Township - 2nd Precinct

Office for which you are seeking nomination: Presidential Elector

Email address: jacob.stephens.701@gmail.com

Name as it is to appear on the Ballot: Jacob Stephens

**CANDIDATE'S AFFIDAVIT** - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn (or affirmed) and subscribed before me this

24 day of July 2024

[Signature]  
 Signature of Officer Administering Affirmation

Notary  
 Official Title

My commission expires 9-2-24

Commonwealth of Pennsylvania - Notary Seal  
 Sandra L. Styer, Notary Public  
 Berks County  
 My commission expires September 20, 2028  
 Commission number 1162696  
 Member, Pennsylvania Association of Notaries

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Jacob C. Stephens  
 Signature of Candidate

484 356 7773

Telephone Number

Berks

County of Residence

**OFFICE USE ONLY**

COUNTY CODE		\$	AMOUNT RECEIVED		F	M
OFFICE	DISTRICT	POLITICAL PARTY		NUMBER OF PAPERS		
COMMENTS						
CHECKER		INPUT		VERIFY		

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
Bureau of Elections

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POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Greene

Name: Williams Last Name, Autumn First Name, Nirde Middle Name or Initial, Suffix

Residential Address: 104 Midway Aly

City: Mount Morris State: PA Zip Code: 15349

Municipality (City, Boro, or Township): Perry Twp Gender: F ☒ M ☐ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): 12

Office for which you are seeking nomination: Presidential Elector

Email address: autumnwilliams131@gmail.com

Name as it is to appear on the Ballot: Autumn Williams

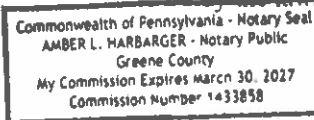
CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn (or affirmed) and subscribed before me this

I swear (or affirm) to the above parts as required by the law applicable to the office I seek.

17th day of July 2024

Amber L. Harbarger  
Signature of Officer Administering Affirmation



Autumn Williams  
Signature of Candidate

Notary  
Official Title

681-285-2567  
Telephone Number

My commission expires March 30, 2027

Greene  
County of Residence

OFFICE USE ONLY

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COMMONWEALTH OF PENNSYLVANIA  
 DEPARTMENT OF STATE  
 Bureau of Elections

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POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Bucks

Name: ADNANE, LOQMAN, R  
Last Name First Name Middle Name or Initial Suffix

Residential Address: 768 LILY RD

City: WARMINSTER State: PA Zip Code: 18974

Municipality (City, Boro, or Township): WARMINSTER Gender: F ☐ M ☒ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): PENNSYLVANIA 1<sup>st</sup>

Office for which you are seeking nomination: Presidential Elector

Email address: logman.adnane@outlook.com

Name as it is to appear on the Ballot: LOQMAN ADNANE

CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Sworn (or affirmed) and subscribed before me this

25 day of July 20 24

Signature of Officer Administering Affirmation

NOTARY PUBLIC

Official Title

My commission expires 5/29/28

Signature of Candidate

215-313-7668

Telephone Number

Bucks

County of Residence

Commonwealth of Pennsylvania - Notary Seal  
 Jacqueline Marsalona, Notary Public  
 Bucks County  
 My Commission Expires May 29, 2028  
 Commission Number 1338353

OFFICE USE ONLY

COUNTY CODE		\$		AMOUNT RECEIVED		F	M
OFFICE	DISTRICT	POLITICAL PARTY		NUMBER OF PAPERS			

COMMENTS

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VERIFY

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
Bureau of Elections

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POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Allegheny

Name: McWilliams, Arnold, W  
Last Name First Name Middle Name or Initial Suffix

Residential Address: 1031 Wolfe Avenue

City: Braddock State: PA Zip Code: 15104

Municipality (City, Boro, or Township): North Braddock Gender: F ☐ M ☒ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

City: Braddock State: PA Zip Code: 15104

Election District of Candidate (district where registered to vote): Allegheny County

Office for which you are seeking nomination: Presidential Elector

Email address: 2becontinued45@gmail.com

Name as it is to appear on the Ballot: Arnold W McWilliams

CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Sworn (or affirmed) and subscribed before me this

26th day of July 2024

Nicholas J Kizina  
Signature of Officer Administering Affirmation

Notary Public  
Official Title

My commission expires 10/19/27

Arnold W McWilliams  
Signature of Candidate

412-932-8874  
Telephone Number

Allegheny County  
County of Residence

Commonwealth of Pennsylvania - Notary Seal  
Nicholas J. Kizina, Notary Public  
Allegheny County  
My commission expires October 19, 2027  
Number 1438643

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COUNTY CODE		\$		AMOUNT RECEIVED		F <input type="checkbox"/> M <input type="checkbox"/>	
OFFICE		DISTRICT		POLITICAL PARTY		NUMBER OF PAPERS	
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DSBE-PBCA (rev. 2/24)

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
Bureau of Elections

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## POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF DauphinName: Martin Tatiana M  
Last Name First Name Middle Name or Initial SuffixResidential Address: 102 University Manor ECity: Hershey State: PA Zip Code: 17033Municipality (City, Boro, or Township): Derry Township Gender: ☒ F ☐ M ☐ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

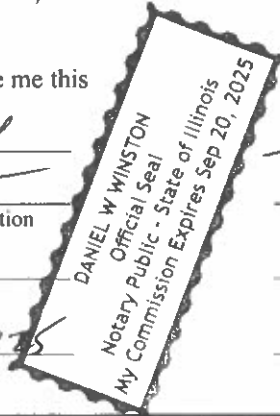
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): 10<sup>th</sup> congressional DistrictOffice for which you are seeking nomination: Presidential ElectorEmail address: tatiana m5517@gmail.comName as it is to appear on the Ballot: Tatiana M. Martin

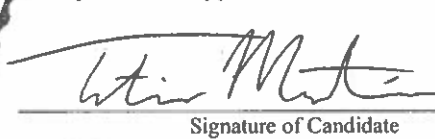
CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn (or affirmed) and subscribed before me this

17 day of July, 2024  
  
 Signature of Officer Administering Affirmation

Notary  
 Official Title
My commission expires 9/20/2025

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

  
 Signature of Candidate

717-810-6156  
 Telephone Number

Dauphin  
 County of Residence

## OFFICE USE ONLY

☐ ☐ COUNTY CODE \$ \_\_\_\_\_  
 AMOUNT RECEIVED
F ☐ M ☐☐ ☐ ☐

OFFICE

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DISTRICT

☐ ☐ ☐POLITICAL  
PARTY☐ ☐ ☐ ☐ ☐ ☐NUMBER OF  
PAPERS☐ ☐

COMMENTS

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VERIFY



**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
Bureau of Elections**

**CANDIDATE'S AFFIDAVIT FOR SUBSTITUTE NOMINATION CERTIFICATE**

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Allegheny SS:

CANDIDATE'S AFFIDAVIT – I do swear (or affirm) that my residence, my election district and the name of the office for which I consent to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that unless I am a candidate for Judge of a Court of Common Pleas, the Philadelphia Municipal Court or the office of school board in a district where that office is elective or the office of magisterial district judge, that I am not a candidate for the same office of any political party or political body other than the one designated herein; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Sworn to (or affirmed) and subscribed before me this

26<sup>th</sup> day of July, 2024.

Commonwealth of Pennsylvania - Notary Seal  
AARON GIBSON JR., Notary Public  
Allegheny County  
My Commission Expires August 12, 2024  
Commission Number 1376972

(SEAL)

(Signature of Person Administering Oath)

My Commission Expires August 12, 2024

Presidential Elector

Office and District (if any)

Charles B. Her

Signature of Candidate

Charles B. Her

Printed Name of Candidate

1203 Love St

Residential Address/Post Office/Zip Code

Pittsburgh

City, Borough, Township

Allegheny

County

Election District of Candidate

(District Where Registered To Vote)

412 608 4569

Telephone Number



DSBE-PBCA (rev. 2/24)

**COMMONWEALTH OF PENNSYLVANIA**  
**DEPARTMENT OF STATE**  
**Bureau of Elections**

PB

## POLITICAL BODY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Allegheny

Name: Hier, Charles, B,   
 Last Name First Name Middle Name or Initial Suffix

Residential Address: 1203 Love Street

City: Pittsburgh State: PA Zip Code: 15218

Municipality (City, Boro, or Township): Pittsburgh Gender: F ☐ M ☒ NB ☐

Mailing Address (if different from residential): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Election District of Candidate (district where registered to vote): 12<sup>th</sup> Cong DistrictOffice for which you are seeking nomination: Presidential ElectorEmail address: hier@pitt.eduName as it is to appear on the Ballot: Charles B. Hier

CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; ~~that if I am a candidate for election at a general or municipal election I shall not be a registered and enrolled member of a political party at any time during the period of thirty (30) days prior to the primary up to and including the day of the following general or municipal election, or if I am a candidate for election at a special election I am not a registered and enrolled member of a political party;~~ that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn (or affirmed) and subscribed before me this

26<sup>th</sup> day of July 20 24

Signature of Officer Administering Affirmation

Notary Public  
 Official Title

My commission expires August 12, 2024

I swear (or affirm) to the above parts as required  
 by the laws applicable to the office I seek.

Charles B. Hier  
 Signature of Candidate

412 608 4569  
 Telephone Number

Allegheny  
 County of Residence

## OFFICE USE ONLY

COUNTY CODE		\$		AMOUNT RECEIVED		F <input type="checkbox"/> M <input type="checkbox"/>	
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OFFICE	DISTRICT	POLITICAL PARTY		NUMBER OF PAPERS			
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COMMENTS							
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DSBE-PB WD (rev. 7/24)

**COMMONWEALTH OF PENNSYLVANIA**  
**DEPARTMENT OF STATE**  
**Bureau of Elections**

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**POLITICAL BODY CANDIDATE'S WITHDRAWAL NOTICE**

**TO THE SECRETARY OF THE COMMONWEALTH:**

I hereby withdraw my name as a candidate for the OFFICE and POLITICAL BODY in the COUNTY and/or DISTRICT listed below for the General Election to be held November 5, 2024.

POLITICAL BODY Justice For All

OFFICE Presidential Elector

COUNTY Philadelphia

DISTRICT \_\_\_\_\_  
COMPLETE IF APPLICABLE

Katherine Marie Hopkins-Bot  
PRINTED NAME OF CANDIDATE

Katherine Marie Hopkins-Bot  
SIGNATURE OF CANDIDATE

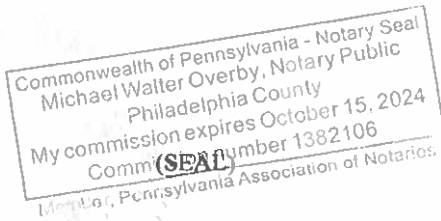
Candidate Number 17

(215) 222-1472  
TELEPHONE NUMBER (OPTIONAL)

On this, the 25 day of July, 2024, before me

Michael Walter Overby the undersigned officer, personally appeared Katherine Hopkins-Bot

known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that they executed the same for the purposes therein contained and desired the same to be recorded as such.



In witness whereof, I hereunto set my hand and official seal.

Michael Walter Overby  
(SIGNATURE)

Notary Public  
(OFFICIAL TITLE)

My Commission Expires 10/15/2024

**NOTE: Withdrawals must be filed not later than 5:00 P.M. on August 12, 2024**

COMMONWEALTH OF PENNSYLVANIA  
 DEPARTMENT OF STATE BUREAU OF ELECTIONS  
 210 NORTH OFFICE BUILDING  
 HARRISBURG, PA 17120

DSBE - PB WD (REV. 7/24)